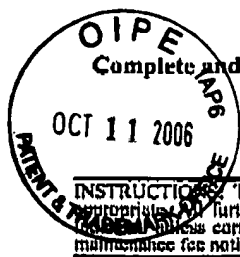


## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. Further correspondence including the Patent, advance order and notification of maintenance fees will be mailed to the current correspondence address as addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Notice: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying paper. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmittal.

35006 7590 07/12/2006

GIFFORD, KRASS, GROH, SPRINKLE & CITKOWSKI, P.C  
PO BOX 7021  
TROY, MI 48007-7021

10/11/2006 AOSMAN2 00000027 071180 10652260

01 FC:2501 700.00 DA  
02 FC:1504 300.00 DA

**Certificate of Mailing-Transmittal**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Sheryl Hammer (Depositor's Name)  
*Sheryl Hammer* (Signature)  
10-11-06 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/652,360	08/29/2003	Jyoti Mazumder	POM-13402/29	1953

TITLE OF INVENTION: METHOD OF FABRICATING COMPOSITE TOOLING USING CLOSED-LOOP DIRECT-METAL DEPOSITION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(D) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	10/12/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
RAO, SHEELA S	2125	700-1600(D)

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Gifford, Krass, Groh, \_\_\_\_\_  
2. Sprinkle, Anderson \_\_\_\_\_  
3. & Citkowski, PC \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 07-1180 (enclose an extra copy of this form).

5. Change in Entry Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(u)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date

Oct. 11, 2006

Typed or printed name

John G. Posa

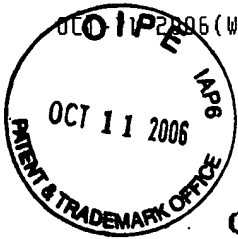
Registration No.

37,424

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

BEST AVAILABLE COPY



OCT 11 2006 (WED) 10:01

GIFFORD KRASS

(FAX) 17349136007

P. 001/003

LAW OFFICES  
**GIFFORD, KRASS, GROH, SPRINKLE, ANDERSON & CITKOWSKI, P.C.**  
PATENT, TRADEMARK AND COPYRIGHT PRACTICE  
303 DETROIT STREET  
SUITE 300  
ANN ARBOR, MICHIGAN 48104-1144

(734) 913-9300  
FACSIMILE (734) 913-6007  
jposa@patlaw.com  
dwathen@patlaw.com  
mbancroft@patlaw.com  
jstaple@patlaw.com

**FACSIMILE TRANSMISSION**

**DATE:** October 11, 2006

**TO:** U.S. PATENT & TRADEMARK OFFICE  
Mail Stop ISSUE FEE

**FACSIMILE NO.:** 571-273-2885

**FROM:** John G. Posa

**PAGES TRANSMITTED (INCLUDING COVER SHEET):** 3

**ORIGINAL DOCUMENTS WILL** \_\_\_\_\_ **/ WILL NOT**  X  **FOLLOW BY MAIL**

**RE:** Serial No. 10/652,260  
Confirmation No. 1953

**MESSAGE:**

Information contained in this facsimile may be **PRIVILEGED** and **CONFIDENTIAL**. It is intended only for the use of the person or entity named above. If you are not the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is neither intended nor permissible. If this facsimile has been received in error, please notify us immediately (call collect) and return the facsimile to us.

**BEST AVAILABLE COPY**